

State of Arkansas**Bond for Reissuing Warrant**

Warrant Number to be Reissued _____ **Amount** _____

Paying State Agency _____ **Phone** _____

Agency Contact _____

Know by all men by these presents that we the undersigned,

_____ as payee(s) and

_____ as his surety, are held and

firmly bound unto the State of Arkansas in the sum of:

_____ (amount must be double the sum of the warrant)

The condition of this obligation is that the said payee,

_____ has (check one):

_____ lost _____ failed to receive _____ stolen

a certain Arkansas State Warrant number as listed below by the Paying State Agency

Witness Our Hands on this _____ day of _____, 20 _____

First Payee Name: _____ Signature: _____

_____ First Payee Taxpayer Identification Number (SSN or Federal ID): _____

_____ Second Payee Name: _____ Signature: _____

_____ Second Payee Taxpayer Identification Number (SSN or Federal ID): _____

Payee	Payee
Mailing	Phone
Address	Number
_____	_____

Surety must be 18 years of age or older and must be someone other than the payee(s)

Surety	Surety
Mailing	Phone
Address	Number
_____	_____

Surety	Surety
Name	Signature
_____	_____
(Printed or Typed Name)	

Surety, after first being duly sworn, states that his real and personal property is sufficient to meet the requirements for the bonded amount.

Subscribed and sworn before this _____ day of _____, 20 _____

Notary Public Signature

My Commission Expires _____ day of _____, 20 _____